Request to adjust concessional contributions

WHO SHOULD COMPLETE THIS FORM?

Only members of a self-managed superannuation fund (SMSF) can complete this form for contributions they made to their SMSF.

COMPLETING THIS FORM

The instructions contain important information

- Print clearly using a black pen only.
- Use BLOCK LETTERS and print one character per box.

The instructions contain important information about completing this form. Refer to them for more information about how to complete and lodge this form.

Se	ection A: Your details
1	Tax file number (TFN) 151697447
	You don't have to provide your TFN to us. However, if you do, it will help us identify you correctly and process your form quickly. For more information on privacy, refer to ato.gov.au/privacy
2	Full name Title: Mr X Mrs Miss Ms Other Family name
	HURST
	First given name Other given names
	RICHARD
3	Date of birth 0 1 / 0 2 / 1 9 7 1 Current postal address Street address 31 REDBANKS ROAD Suburb/town/locality WILLASTON State/territory Postcode 5 1 1 8 (Australia only)
5	Daytime phone number (include area code) 0 8 8 5 2 3 2 0 9 3
Se	ection B: Self Managed Superannuation Fund Details
	The SMSF to which the concessional contributions to be adjusted were made:
6	What is your Australian business number (ABN)? 67287083410
7	Fund name
-	R & L HURST SUPERANNUATION FUND

Section C: Details of the financial years in which concessional contributions will be adjusted

8	Year 1 - The financial year in which the contributions referred to in Section D were <u>made</u> to the SMSF but not allocated to you:
	Year ending 30 June 2 0 1 9
9	Year 2 - The financial year in which the contributions referred to in Section D were allocated to you by the SMSF's trustees:
	Year ending 30 June 2020
Se	ection D: Details of concessional contributions to be adjusted
40	
10	Personal Contributions – The amount of the personal contributions you made to the SMSF in Year 1, which were not allocated until Year 2, and for which you will be claiming a tax deduction in Year 1.
	\$ 2000-00
	In the SMSF annual return for Year 1, these contributions will be included as 'assessable personal contributions' in Section B and as 'personal contributions' made by you in Section F or G.
44	Francisco Contributions The constant of the contribution to the contribution of the co
11	Employer Contributions – The amount of the employer contributions, including salary sacrifice contributions, your employer made to the SMSF in Year 1 and which were not allocated to you until Year 2.
	\$
	In the SMSF annual return for Year 1, these contributions will be included as 'assessable employer contributions' in Section B and as 'employer contributions' made on your behalf in Section F or G.

Section E: Declaration

Privacy

The ATO is a government agency bound by the Privacy Act 1988 in terms of collection and handling of personal information and TFNs. For further information about privacy law notices go to **ato.gov.au/privacy**

Complete the declaration that applies to you. Print your full name then sign and date the declaration.

INDIVIDUAL DECLARATION I declare that the information contained in this form is true and correct.
Name (Print in BLOCK LETTERS)
Signature
Date Day Month Year
AGENT OR AUTHORISED OFFICER DECLARATION complete this declaration if you are an authorised representative of the individual shown in Section A.
declare that: I have prepared the form with the information supplied by the individual I have received a declaration made by the individual that the information provided to me for the preparation of this statement is true and correct I am authorised by the individual to give the information in this form to the Australian Taxation Office.
Signature Date
Day Month Year
Tax agent number (if applicable) 2 5 4 5 2 5 8 9
Name of organisation (if applicable)
PDK FINANCIAL SYNERGY PTY LTD
Agent or Authorised Officer name Title: Mr Mrs Miss Ms Other Family name LOUNDER
First given name Other given names
PHILLIP
Agent or Authorised Officer phone number (include area code) 0882719555
Agent or Authorised Officer address Street address
LEVEL 5/195 NORTH TERRACE
Suburb/town/locality State/territory Postcode
ADELAIDE S A S (Australia only) (Australia only) (Australia only)

Lodging your form

Post or fax your completed and signed form to:

- fax on 1300 139 024
- mail to

Australian Taxation Office PO Box 3578 ALBURY NSW 2640